Atty. Docket No. MAMC 00-19A 02 Amdt, Dated March 16, 2005 Reply to Office action of December 21, 2004 Appl. No. 10/038,567

REMARKS/ARGUMENTS

Summary of the Office Action

Upon entry of this Amendment, claims 1-26 are all the claims pending in the application. Claims 19-26 have been added. Claims 1-18 have been examined and all of claims 1-18 have been rejected. Specifically, claims 1, 2, 4, 6, 7, 9 and 11-18 have been rejected under 35 U.S.C. § 102(b) as being *anticipated* by Rensimer et al. (USP 5,845, 253). Additionally, claims 3, 5, 8 and 10 have been rejected under 35 U.S.C. § 103 as being *unpatentable* over Rensimer et al.

For the reasons set forth below, Applicant respectfully traverses the rejections and requests favorable disposition of the application.

Summary of Argument

Applicant respectfully submits that Rensimer et al. does not anticipate, or otherwise render obvious, any of claims 1-10 at least because Rensimer et al. fails to teach or suggest accepting input that identifies two different names for a substantially similar grouping of medical criteria. Furthermore, Rensimer et al. also do not disclose accepting further input that specifies one or both of the two different names as a part of a standardized nomenclature for the similar grouping of criteria.

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With respect to claims 11-18, Applicant has voluntarily canceled these claims and added new claims 19-26. Accordingly, the rejection of claims 11-18 is rendered moot and should be withdrawn.

Rejection under 35 U.S.C. § 102

Rensimer et al. is directed to a system and method for processing patient data that "permits physicians and other medical staff personnel to record, accurately and precisely, historical patient care information." (See, e.g., Abstract). According to one embodiment, a handheld computing device is carried by a medical provider and data corresponding to each patient examined by the provider is extracted and input to the device as needed. For example, after a patient has been examined, and a diagnosis for the patient has not already been recorded on the device, the provider "is prompted to select a diagnosis" and "a diagnosis code representing the selected diagnosis for the patient is stored in the data store" of the device. (Col. 4, lines 53-56). Further, if the provider determines that the appropriate diagnosis is not presently available as a choice on the device, a new diagnosis can be added. (Col. 4, lines 59-63).

Nothing within the Rensimer et al. disclosure and, in particular, nothing within the cited portion, i.e., Col. 4, lines 48-67, contemplates the notion of inputting two different names for substantially the same group of criteria. Rensimer et al. simply does not teach accepting input that identifies two different names for a substantially similar grouping of medical criteria, as required by independent claims 1 and 6. For at least this reason, Applicant submits that Rensimer et al. does not anticipate, or even render

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obvious, any of claims 1-10 and the §102 rejection of claims 1, 2, 4, 6, 7 and 9 should be withdrawn. Claims 2-5 and 7-10 are patentable at least by virtue of their dependency from independent claims 1 and 6.

Furthermore, Rensimer et al. also do not disclose accepting further input that specifies one or both of the two different names as a part of a standardized nomenclature for the similar grouping of criteria, as required by claim 1 and substantially by claim 6.

Indeed, at column 5, lines 1-16, Rensimer et al. discloses that a staff member is prompted to select a service type from a list of standard service types, including *outpatient* services and hospital *inpatient* services. There exists no disclosure within Rensimer et al., however, that indicates that the selected service type has anything to do with specifying one or both of two different names for the same set of criteria as a standard nomenclature. The inputted data in Rensimer et al. merely facilitates recordation of the general type of service provided. For this additional reason, Applicant submits that Rensimer et al. does not anticipate, or otherwise render obvious, any of claims 1-10 and the rejection of these claims should be withdrawn.

Patentability of New Claims

For additional claim coverage merited by the scope of the invention, Applicant has added new claims 19-26. Applicant submits that the prior art does not disclose, teach, or otherwise suggest the combination of features contained therein.

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Conclusion

In view of the above, reconsideration and allowance of this application are now believed to be in order, and such actions are hereby solicited. If any points remain in issue which the Examiner feels may be best resolved through a personal or telephone interview, the Examiner is kindly requested to contact the undersigned at the telephone number listed below.

Respectfully submitted,

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